

**EXHIBIT 2: CLAIM NO. 3006**

B10 (Official Form 10) (04/13) (Modified)

<b>UNITED STATES BANKRUPTCY COURT</b> <b>EASTERN DISTRICT of MICHIGAN</b>		<b>CHAPTER 9</b> <b>PROOF OF CLAIM</b> <div style="font-size: 2em; font-weight: bold; margin: 5px 0;">FILED</div> <div style="font-size: 1.2em; font-weight: bold; margin: 5px 0;">FEB 21 2014</div> <div style="font-size: 0.8em; font-weight: bold; margin: 5px 0;">COURT USE ONLY</div> <div style="font-size: 0.8em;"> <input type="checkbox"/> Check this box if this claim amends a previously filed claim.  <b>US Bankruptcy Court</b>  <b>MI Eastern District</b>            Court Claim Number: _____            (If known)            Filed on: _____         </div>
Name of Debtor: <b>City of Detroit, Michigan</b> Case Number: <b>13-53846</b>		<div style="font-size: 0.8em; font-weight: bold; margin: 5px 0;">RECEIVED</div>
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): <b>GARFIELD Woodberry</b>		<div style="font-size: 0.8em;"> <input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.         </div>
Name and address where notices should be sent: <b>GARFIELD WOODBERY</b> <b>803 GLADSTONE</b> <b>DET MI 48202</b>		
Telephone number: <b>3135159774</b> email: <b>Jedgcsu3AR@gmail.com</b>		
Name and address where payment should be sent (if different from above):		
Telephone number:      email:		
<b>1. Amount of Claim as of Date Case Filed:</b> \$ <u>1,000,000.00</u>		<b>FEB 24 2014</b>
If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement.		
<b>2. Basis for Claim:</b> <u>City took Property without Paying Just Compensation</u> (See instruction #2)		
<b>3. Last four digits of any number by which creditor identifies debtor:</b> <u>NA</u>	<b>3a. Debtor may have scheduled account as:</b> <u>NA</u> (See instruction #3a)	
<b>4. Secured Claim</b> (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.		
Nature of property or right of setoff: <input checked="" type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe:		
Value of Property: \$ <u>1,000,000.00</u> Amount of Secured Claim: \$ <u>1,000,000.00</u> Annual Interest Rate (when case was filed) _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable      Amount Unsecured: \$ <u>-0-</u>		
<b>5. Amount of Claim Entitled to Priority as an Administrative Expense under 11 U.S.C. §§ 503(b)(9) and 507(a)(2).</b> \$ <u>NA</u>		
<b>5b. Amount of Claim Otherwise Entitled to Priority. Specify Applicable Section of 11 U.S.C. §</b> <u>US Const. 5th AM</u> \$ <u>1,000,000.00</u>		
<b>6. Credits.</b> The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)		
<b>7. Documents:</b> Attached are <b>redacted</b> copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and <b>redacted</b> copies of documents providing evidence of perfection of a security interest are attached. (See instruction #7, and the definition of "redacted".) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain:		
<b>8. Signature:</b> (See instruction # 8) Check the appropriate box.		
<input type="checkbox"/> I am the creditor. <input checked="" type="checkbox"/> I am the creditor's authorized agent. <input type="checkbox"/> I am the trustee, or the debtor, or their authorized agent. <input type="checkbox"/> I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.) (See Bankruptcy Rule 3004.)		
I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.		
Print Name: <u>CRANSTON Woodberry</u> Title: <u>Authorized Agent</u> Company: _____ Address and telephone number (if different from notice address above): _____ _____ Telephone number: _____ email: _____		
(Signature) <u>[Signature]</u> (Date) <u>2-21-12</u>		